

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>AW</i>		1/4/00
O.I.P.E. CLASSIFIER		48	1/13/00
FORMALITY REVIEW		<i>WHT</i>	2-1-00
RESPONSE FORMALITY REVIEW		<i>WHT</i>	3-27-00

INDEX OF CLAIMS

..... Rejected
 Allowed
 (Through numeral)..... Canceled
 Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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